

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes OIL C-101 and C-11  
Effective 1-1-65

Operator <b>Gulf Oil Corporation</b>	
Address <b>Box 670, Hobbs, New Mexico 88240</b>	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input type="checkbox"/>	Recompleted in Blinebry and commingled Blinebry with existing Drinkard in Well Bore. R-5273
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>H. T. Mattern (NCT-B)</b>	Well No. <b>16</b>	Pool Name, including Formation <b>Blinebry</b>	Kind of Lease State, Federal or Fee <b>Fee</b>	Lease No.
Location				
Unit Letter <b>D</b> ; <b>330</b> Feet From The <b>North</b> Line and <b>330</b> Feet From The <b>West</b>				
Line of Section <b>31</b> Township <b>21-S</b> Range <b>37-E</b> , NMPM, <b>Lea</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<b>Texas-New Mexico Pipe Line Company</b>	<b>Box 1510, Midland, Texas 79701</b>					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
<b>Warren Petroleum Corporation</b>	<b>Box 1589, Tulsa, Oklahoma 74100</b>					
If well produces oil or liquids, give location of tanks.	Unit <b>P</b>	Sec. <b>30</b>	Twp. <b>21-S</b>	Rge. <b>37-E</b>	Is gas actually connected? <b>Yes</b>	When <b>Unknown</b>

If this production is commingled with that from any other lease or pool, give commingling order number: **R-5273**

IV. COMPLETION DATA

Designate Type of Completion -- (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input checked="" type="checkbox"/>
Date Spudded <b>10-16-76</b>	Date Compl. Ready to Prod. <b>10-16-76</b>		Total Depth <b>6810'</b>		P.B.T.D. <b>5770'</b>			
Elevations (DF, RKB, RT, GR, etc.) <b>3511' GL</b>	Name of Producing Formation <b>Blinebry</b>		Top Oil/Gas Pay <b>5532'</b>		Tubing Depth <b>5731'</b>			
Perforations <b>5532' to 5731'</b>					Depth Casing Shoe <b>6809'</b>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<b>11"</b>	<b>8-5/8"</b>		<b>1237'</b>		<b>400 sacks (Circulated)</b>			
<b>7-7/8"</b>	<b>5-1/2"</b>		<b>5877'</b>		<b>735 sacks (TOC at 2080')</b>			
<b>4-3/4"</b>	<b>4" liner</b>		<b>6809' (Top at 5780')</b>		<b>65 sacks (TOC at 5870')</b>			
	<b>2-3/8"</b>		<b>5731'</b>					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks <b>10-16-76</b>	Date of Test <b>10-16-76</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Swab</b>	
Length of Test <b>24 hours</b>	Tubing Pressure <b>--</b>	Casing Pressure <b>--</b>	Choke Size <b>2"</b>
Actual Prod. During Test <b>55 barrels</b>	Oil-Bbls. <b>15</b>	Water-Bbls. <b>40</b>	Gas-MCF <b>--</b>

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

**C.R. Kargkura**  
(Signature)

**Project Petroleum Engineer**  
(Title)

**December 1, 1976**  
(Date)

OIL CONSERVATION COMMISSION

APPROVED **DEC 2 1976**, 19\_\_\_\_\_  
BY **Jerry Sexton**  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

RECEIVED

1976

OIL CONSERVATION COMM.  
HOBBS, N. M.